

(Official Form 1) (12/03) West Group, Rochester, NY

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

FORM B1, Page 2

HAYES-HALLEY, CAROLYN**Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)**

Location Where Filed:

Northern District of Illinois

Case Number:

04-05298

Date Filed:

2/12/2004**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)**

Name of Debtor:

NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ HAYES-HALLEY, CAROLYN

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

4/11/3005

Date

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)

☐ Exhibit A is attached and made a part of this petition

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

X /s/ Paul M. Bach4/11/3005

Signature of Attorney for Debtor(s)

Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?

☐ Yes, and exhibit C is attached and made a part of this petition.
☒ No

Signature of AttorneyX /s/ Paul M. Bach

Signature of Attorney for Debtor(s)

Paul M. Bach 06209530

Printed Name of Attorney for Debtor(s)

Law Firm of Paul M. Bach

Firm Name

1955 Shermer Road, Unit 150

Address

Northbrook IL 60062847-564-0808

Telephone Number

4/11/3005

Date

Signature of Non-Attorney Petition Preparer

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed Name of Bankruptcy Petition Preparer

Social Security Number

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

X

Signature of Bankruptcy Petition Preparer

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

219,000.00

In re HAYES-HALLEY, CAROLYN

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C-Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.		<i>Cash on hand</i> <i>Location: In debtor's possession</i>		\$ 100.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<i>Bank account</i> <i>Location: In debtor's possession</i>		\$ 100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		<i>Household goods and furnishings</i> <i>Location: In debtor's possession</i>		\$ 1,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<i>Books and pictures</i> <i>Location: In debtor's possession</i>		\$ 200.00
		<i>Jewelry</i> <i>Location: In debtor's possession</i>		\$ 200.00
6. Wearing apparel.		<i>Wearing apparel</i> <i>Location: In debtor's possession</i>		\$ 350.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

In re HAYES-HALLEY, CAROLYN

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts Receivable.	X			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			
23. Automobiles, trucks, trailers and other vehicles.		2002 MercedesBenz C-240 Location: In debtor's possession		\$ 26,000.00
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.	X			
27. Machinery, fixtures, equipment and supplies used in business.	X			
28. Inventory.	X			

In re HAYES-HALLEY, CAROLYN

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	X			
31. Farming equipment and implements.	X			
32. Farm supplies, chemicals, and feed.	X			
33. Other personal property of any kind not already listed. Itemize.	X			
Total ➡				\$ 27,950.00

In re HAYES-HALLEY, CAROLYN / DebtorCase No. _____
(if known)**SCHEDULE C-PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b) (1): Exemptions provided in 11 U.S.C. § 522(d). Note: These exemptions are available only in certain states.☒ 11 U.S.C. § 522(b) (2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemptions
661 Lakeside Circle Dr., Wheeling, IL 60090-5325	735 ILCS 5/12-901	\$ 4,933.61	\$ 219,000.00
Cash on hand	735 ILCS 5/12-1001(b)	\$ 100.00	\$ 100.00
Bank account	735 ILCS 5/12-1001(b)	\$ 100.00	\$ 100.00
Household goods and furnishings	735 ILCS 5/12-1001(b)	\$ 1,000.00	\$ 1,000.00
Books and pictures	735 ILCS 5/12-1001(b)	\$ 200.00	\$ 200.00
Jewelry	735 ILCS 5/12-1001(b)	\$ 200.00	\$ 200.00
Wearing apparel	735 ILCS 5/12-1001(a)	\$ 350.00	\$ 350.00
2002 MercedesBenz C-240	735 ILCS 5/12-1001(c)	\$ 1,200.00	\$ 26,000.00

FORM B6D (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No: LAKE Creditor # : 1 ASI 830 S. Buffalo Grove Road Suite 100 Buffalo Grove Illinois 560089	X	assessment arrearage 661 Lakeside Circle Dr., Wheeling, IL 60090-5325 Value: \$ 219,000.00				\$ 388.00	\$ 0.00
Account No: Creditor # : 2 Great Bank 234 S. Randall Road Algonquin IL 60102		car loan 2002 MercedesBenz C-240 Value: \$ 26,000.00				\$ 26,325.54	\$ 325.54
Account No: 95-3 Creditor # : 3 Household Fiannce P.O. Box 17574 Baltimore MD 21297-1574	X	2nd mortgage 661 Lakeside Circle Dr., Wheeling, IL 60090-5325 Value: \$ 219,000.00				\$ 48,500.00	\$ 0.00
Account No: 95-3 Creditor # : 4 Household Finance P.O. Box 17574 Baltimore Maryland 21297-1574		2nd mortgage arrearage 661 Lakeside Circle Dr., Wheeling, IL 60090-5325 Value: \$ 219,000.00				\$ 1,441.77	\$ 0.00

1 continuation sheets attached

Subtotal \$ 76,655.31
(Total of this page)
Total \$

(Use only on last page. Report total also on Summary of Schedules)

FORM B6D (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	C o n t i n g e n t	U n l i q u i t e d	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No: 6674 Creditor # : 5 Washington Mutual Bank P.O. Box 70308 Charlotte NC 28272		H--Husband W--Wife J--Joint C--Community 661 Lakeside Circle Dr., Wheeling, IL 60090-5325 Value: \$ 219,000.00				\$ 149,500.00	\$ 0.00
Account No: 6274 Creditor # : 6 Washington Mutual Bank P.O. Box 70308 Charlotte NC 28272	X	1st mortgage arrearage 661 Lakeside Circle Dr., Wheeling, IL 60090-5325 Value: \$ 219,000.00				\$ 6,736.62	\$ 0.00
Account No:							
Account No:							
Account No:							
Account No:							
Account No:							

Sheet No. 1 of 1 continuation sheets attached to Schedule of Creditors

Holding Secured Claims

Subtotal \$	156,236.62
(Total of this page)	
Total \$	232,891.93

(Use only on last page. Report total also on Summary of Schedules)

In re HAYES-HALLEY, CAROLYN / Debtor Case No. _____
(if known)

SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,925* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance or Support**

Claims of a spouse, former spouse, or child of the debtor, for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, custom duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

No continuation sheets attached

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No:						\$ 468.00
Creditor # : 1 Americash Loans 880 Lee Street Des Plaines Illinois 60016						
Account No:						\$ 587.00
Creditor # : 2 Bally Health Club 225 Rand Road Mount Prospect IL 60056						
Account No: -613						\$ 188.59
Creditor # : 3 Brylane Home P.O. Box 659728 San Antonio TX 78265-9728						
Account No:						\$ 659.00
Creditor # : 4 Certified Services P.O. Box 177 Waukegan Illinois 60079						
<div> <div>4 continuation sheets attached</div> <div> <div>Subtotal \$</div> <div>(Total of this page)</div> <div>Total \$</div> <div>(Report total also on Summary of Schedules)</div> </div> </div>						1,902.59

FORM B6F (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: Creditor # : 5 Com Ed Bill Payment Center Chicago IL 60668-0001						\$ 449.00
Account No: Creditor # : 6 Comcast Telephone P.O. Box 173909 Denver CO 80217-3908						\$ 251.97
Account No: 5008 Creditor # : 7 Crossing Pointe 220 Hickory Street Warren PA 16368-2000						\$ 97.07
Account No: -274 Creditor # : 8 Dell Payment Processing Center P.O. Box 6403 Carol Stream IL XX						\$ 1,779.08
Account No: 0630 Creditor # : 9 Ginny's 1112 7th Avenue Monroe Wisconsin 53566-1364						\$ 382.20
Account No: 06-2 Creditor # : 10 Glenview Credit Union 1631 Waukegan Road Glenview IL 60025						\$ 1,849.00

Sheet No. 1 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	4,808.32
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: Creditor # : 11 ICS 2207 Concord Pike Suite 417 Wilmington Delaware 79803						\$ 298.00
Account No: Creditor # : 12 IL Dept. of Employment Benefits Repayments P.O. Box 4385 Chicago IL 60680-4385						\$ 276.00
Account No: Creditor # : 13 Merchant's Credit Guide Co. 223 W. Jackson Blvd., #900 Chicago IL 60606-6993						\$ 22.60
Account No: 5550 Creditor # : 14 Midnight Velvet 1112 7th Avenue Monroe Wisconsin 53566-1364						\$ 960.45
Account No: 1146 Creditor # : 15 Mill Creek Bank Department 0008 Palatine IL 60055-0008	X					\$ 7,655.63
Account No: 5110 Creditor # : 16 Monroe and Main 1112 7th Avenue Monroe Wisconsin 53566-1364						\$ 96.08

Sheet No. 2 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	9,308.76
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No:						\$ 440.75
Creditor # : 17 Nicor Gas P.O. Box 416 Aurora IL 60568						
Account No:						\$ 1,625.00
Creditor # : 18 Pat Nowssel 710 Waukegan Road, #3B Glenview IL 60025						
Account No:						\$ 260.00
Creditor # : 19 Preferred Cash 2533 N. Carson Street #5024 Carson City NV 89706						
Account No:						\$ 875.00
Creditor # : 20 PRL Direct Suite 460 901 Market Street Wilmington Delaware 19801						
Account No: 9022						\$ 253.97
Creditor # : 21 Professional Account Managemen P.O. Box 391 Milwaukee Wisconsin 53201-0391						
Account No: 5570						\$ 1,299.34
Creditor # : 22 Seventh Avenue 1112 7th Avenue Monroe Wisconsin 53566-1364						

Sheet No. 3 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	4,754.06
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re HAYES-HALLEY, CAROLYN / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: <u>55-0</u> Creditor # : 23 United Compucred Collections 4190 Harrison Avenue P.O. Box 111100 Cincinnati Ohio 45211-0391						\$ 85.75
Account No:						
Account No:						
Account No:						
Account No:						
Account No:						

Sheet No. 4 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	85.75
Total \$ (Report total also on Summary of Schedules)	20,859.48

In re HAYES-HALLEY, CAROLYN

/ Debtor

Case No. _____

(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☐ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, including Zip Code, of other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.
<i>George Whitehead 661 Lakeside Circle Dr. Wheeling IL 60090</i>	Contract Type: <i>Residential Lease</i> Terms: Beginning date: Debtor's Interest: Description: <i>\$11000 per month</i> Buyout Option:

In re HAYES-HALLEY, CAROLYN / DebtorCase No. _____
(if known)**SCHEDULE H-CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☐ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor
<i>Cornelious Halley</i> <i>1511 N. Mason Avenue</i> <i>Chicago IL 60651</i>	<i>ASI</i> <i>830 S. Buffalo Grove Road</i> <i>Suite 100</i> <i>Buffalo Grove Illinois 560089</i> <i>Household Fiannce</i> <i>P.O. Box 17574</i> <i>Baltimore MD 21297-1574</i> <i>Mill Creek Bank</i> <i>Department 0008</i> <i>Palatine IL 60055-0008</i> <i>Washington Mutual Bank</i> <i>P.O. Box 70308</i> <i>Charlotte NC 28272</i>

In re HAYES-HALLEY, CAROLYN

/ Debtor

Case No. _____

(if known)

SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status: Divorced	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE
EMPLOYMENT: DEBTOR SPOUSE		
Occupation	Executive Assistant	
Name of Employer	Anixter, Inc.	
How Long Employed	4 years	
Address of Employer	2301 Patriot Boulevard Glenview Illinois 60025	
Income: (Estimate of average monthly income)	DEBTOR	SPOUSE
Current Monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ 3,624.99	\$ 0.00
Estimated Monthly Overtime	\$ 0.00	\$ 0.00
SUBTOTAL	\$ 3,624.99	\$ 0.00
LESS PAYROLL DEDUCTIONS		
a. Payroll Taxes and Social Security	\$ 729.47	\$ 0.00
b. Insurance	\$ 83.11	\$ 0.00
c. Union Dues	\$ 0.00	\$ 0.00
d. Other (Specify):	\$ 0.00	\$ 0.00
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 812.59	\$ 0.00
TOTAL NET MONTHLY TAKE HOME PAY	\$ 2,812.40	\$ 0.00
Regular income from operation of business or profession or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Income from Real Property	\$ 1,100.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
Social Security or other government assistance		
Specify:	\$ 0.00	\$ 0.00
Pension or retirement income	\$ 0.00	\$ 0.00
Other monthly income		
Specify: second job	\$ 700.00	\$ 0.00
TOTAL MONTHLY INCOME	\$ 4,612.40	\$ 0.00
TOTAL COMBINED MONTHLY INCOME \$ <u>4,612.40</u>		
(Report also on Summary of Schedules)		

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

In re HAYES-HALLEY, CAROLYN / DebtorCase No. _____
(if known)**SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR**

Complete this schedule by estimating the average expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities: Electricity and heating fuel	\$	250.00
Water and sewer	\$	44.60
Telephone	\$	75.00
Other	\$	0.00
Other	\$	0.00
Other	\$	0.00
Home maintenance (Repairs and upkeep)	\$	100.00
Food	\$	450.00
Clothing	\$	125.00
Laundry and dry cleaning	\$	50.00
Medical and dental expenses	\$	0.00
Transportation (not including car payments)	\$	155.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
Charitable contributions	\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	60.00
Life	\$	0.00
Health	\$	0.00
Auto	\$	100.00
Other	\$	0.00
Other	\$	0.00
Other	\$	0.00
Taxes (not deducted from wages or included in home mortgage)		
Specify:	\$	0.00
Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Alimony, maintenance, and support paid to others	\$	0.00
Payments for support of additional dependents not living at your home	\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
Other: Second Mortgage	\$	637.80
Other:	\$	0.00
Other:	\$	0.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	2,147.40

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly Income	\$	4,212.40
B. Total projected monthly expenses	\$	2,147.40
C. Excess Income (A minus B)	\$	2,065.00
D. Total amount to be paid into plan each: Monthly	\$	2,065.00